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(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE IRONS LAW FIRM

219 North Court Street
Florence, Alabama 35630
Telephone (256) 766-9201
Telecopier (256) 766-9220

Tammy L. Irons

September 28, 2017

Licensed In Alabama and Tennessee
Writer's E-mail: tammy@ironslawfirm.com

Division of Corporations
Registration Section
P. O. Box 6327
Tallahassee, FL 32314

Re: Atlantic at Ft. Lauderdale, LLC


Dear Sir or Madam:

Enclosed please find the following documents to be recorded by your office regarding the above entity:

- Cover Letter
- Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida
- Certificate of Existence

Additionally, I have enclosed a check payable to the Division of Corporations Registration Section in the amount of \$125.00 for the required filing fee. Let me know if you have any questions.

Sincerely,



Tammy L. Irons

Enclosure
TLL/rsa

c: James O. Thompson

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ATLANTIC AT FT. LAUDERDALE, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

TAMMY L. IRONS
Name of Person
THE IRONS LAW FIRM
Firm/Company
219 NORTH COURT STREET
Address
FLORENCE, AL 35630
City/State and Zip Code
TAMMY@IRONSLAWFIRM.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RACHEL ABERNATHY at (256) 766-9201
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ATLANTIC AT FT. LAUDERDALE, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. ALABAMA
(Jurisdiction under the law of which foreign limited liability company is organized)

3.
(FEI number, if applicable)

4.
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 201 ASHLEY AVENUE
(Street Address of Principal Office)
FLORENCE, AL 35630

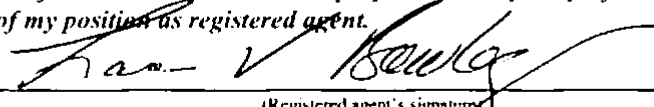
6. P. O. BOX 2002
(Mailing Address)
FLORENCE, AL 35630

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: LAURA BOWLEG
Office Address: 601 N. FT. LAUDERDALE BEACH BLVD.
FT. LAUDERDALE, Florida 33304
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

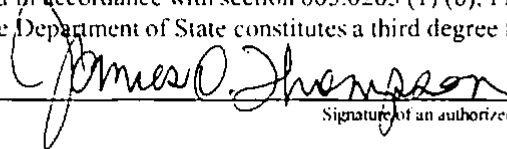
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

| Title or Capacity: | Name and Address: | Title or Capacity: | Name and Address: |
|--------------------|---|--------------------|-------------------|
| SOLE MEMBER | JAMES O. THOMPSON P. O. BOX 2002 FLORENCE, AL 35630 | | |
| | | | |
| | | | |
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(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Signature of an authorized person
JAMES O. THOMPSON
Typed or printed name of signee

17 OCT - 2 AM 7:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the
Great and Principal Seal of said State, do hereby certify that**

the entity records on file in this office disclose that Atlantic at Ft. Lauderdale, LLC
was formed in Lauderdale County, Alabama on July 12, 2017. The Alabama Entity
Identification number for this entity is 396-394. I further certify that the records do
not disclose that said entity has been dissolved, cancelled or terminated.

**In Testimony Whereof, I have hereunto set my
hand and affixed the Great Seal of the State, at the
Capitol, in the city of Montgomery, on this day.**

09/28/2017

Date

J. H. Merrill

John H. Merrill

Secretary of State



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